ı	Change in Company's premium or rate	e level produced by rate revision effective	9/15/08
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability	•	
= -	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$133,480	3.8%
10.	Extended Coverage	Included	Included
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$1,626,797	12.7%
14.	Crop Hail	ψ1,020,7 <i>9</i> 7	
15.	Other		
15.	Line of Insurance		***
All I	SO property classes and territories.	erritories) or certain classes? If so, specify:	
Brief o	description of filing. (If filing follows	rates of an advisory organization, specify	organization):
Ado	pting ISO reference filing CF-2007-RI	LA1 and revising Loss Cost Multipliers and	d Package Modification
Facto	ors for property.		
** C	djusted to reflect all prior rate change hange in Company's premium level wesult from application of new rates.	s. hich will	
		American Fooner	my Ingymonae Commony
			my Insurance Company me of Company
		iva	me of Company
		Tim Borders, Fili	ngs Analyst
			Official - Title

	Change in Company's premium or rate	e level produced by rate revision effective	9/15/08
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
2	Commercial		- AMARIA
3. 4.	Liability Other Than Auto Burglary and Theft		
4. 5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$243,579	2.0%
10.	Extended Coverage	Included	Included
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$2,074,485	11.4%
14.	Crop Hail		
15.	Other Line of Insurance	41.	
	iling only apply to certain territory (te SO property classes and territories.	erritories) or certain classes? If so, specify:	
Adoj	oting ISO reference filing CF-2007-RI	rates of an advisory organization, specify and LA1 and revising Loss Cost Multipliers and	
Facto	ors for property.		
* A	djusted to reflect all prior rate change		
	hange in Company's premium level w		
	sult from application of new rates.		
	••		
			nsurance Company
		Nar	ne of Company
		Tim Borders, Filir	ngs Analyst
			Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/15/2008 (3) (1) (2) **Annual Premium Percent** Volume (Illinois)* Change (+ or -)** **Coverage Automobile Liability Private** Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery -20.4% 9. Fire 673.407 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Citizens Insurance Company of America Name of Company Michele L. Holm - Pricing Consultant

Official - Title

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SPRINGFIELD, ILLINOIS

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/15/2008 (1) (2) (3)**Annual Premium** Percent Volume (Illinois)* Change (+ or -)** **Coverage** Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass Fidelity 7. Surety **Boiler and Machinery** 8. 9. Fire -23.0% 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Citizens Insurance Company of Illinois Name of Company

Michele L. Holm - Pricing Consultant
Official - Title

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	SPRINGFIELD, ILLINOIS	-	

	Change in Company's premium or rate le	evel produced by rate revision effective	10/1/08 N & 12/1/08 R
			(0)
	(1)	(2)	(3) Percent
	Coverage	Annual Premium Volume (Illinois)*	Change (+ or -)**
	Coverage	vocano (minolo)	
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.			
11.	,		
	Homeowners		
	Commercial Multi-Peril	<u> </u>	
	Crop Hail	\$ 50,648	5.00%
15.	Other DWELLING Line of Insurance	\$ 50,648	3.0076
	Line of insurance		
Doe	es filing only apply to certain territory (territ	ories) or certain classes? If so specify	No
טטפ	is filling only apply to certain territory (territ	ones, or octain classes: It so, specify	
Brie	f description of filing. (If filing follows rate	s of an advisory organization, specify orga	anization):
	Revised base rates in all territories.		
		,	
		•	
*	Adjust to reflect all prior rate changes.		
**	Change in Company's premium level wh	ich will result from application of new rate	s.

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SPRINGFIELD, ILLINOIS

COLUMBIA MUTUAL INS. CO.

Name of Company

Dennis McVay, CPCU
Director, Research & Development
Official - Title

Serff# CLBA-125781016

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$232,929	2.5%
10.	Extended Coverage	Included	Included
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$1,453,944	10.7%
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (to SO property classes and territories.	erritories) or certain classes? If so, specify:	
			organization):
Ado	description of filing. (If filing follow pting ISO reference filing CF-2007-R ors for property.	LA1 and revising Loss Cost Multipliers and	l Package Modification
Ado Fact	pting ISO reference filing CF-2007-R ors for property.	LA1 and revising Loss Cost Multipliers and	l Package Modification
* A	pting ISO reference filing CF-2007-R	LA1 and revising Loss Cost Multipliers and	l Package Modification
* A	pting ISO reference filing CF-2007-R ors for property. djusted to reflect all prior rate change change in Company's premium level w	LA1 and revising Loss Cost Multipliers and second s	l Package Modification

Tim Borders, Filings Analyst
Official - Title

(Change in Company's premium or rate	e level produced by rate revision effective	9/15/08
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
••	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$55,362	4.9%
10.	Extended Coverage	Included	Included
11.	Inland Marine	NAME OF THE PARTY	
12.	Homeowners		
13.	Commercial Multi-Peril	\$395,677	11.5%
14.	Crop Hail	Ψ373,077	111070
15.	Other		
15.	Line of Insurance	- W14	
	iling only apply to certain territory (to SO property classes and territories.	erritories) or certain classes? If so, specify	:
Brief	description of filing. (If filing follows	s rates of an advisory organization, specify LA1 and revising Loss Cost Multipliers an	organization):
	ors for property.	LAT and revising Loss Cost Waltiphers an	d I dekage Modification
racii	ors for property.		
** C	djusted to reflect all prior rate change hange in Company's premium level w sult from application of new rates.		
		C 1 In	- C
			e Company of America
		142	ime of Company
		Tim Borders, Fil	ings Analyst
			Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/15/2008 (3) (1) (2) Percent **Annual Premium** Volume (Illinois)* Change (+ or -)** Coverage 1. **Automobile Liability Private** Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass Fidelity 6. 7. Surety 8. Boiler and Machinery 9. Fire -20.0% 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Filing to adopt ISO Loss Costs and revise LCM's. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Hanover Insurance Company Name of Company



Michele L. Holm - Pricing Consultant
Official – Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/15/2008

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. 2. 3. 4. 5.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass		
6. 7. 8. 9.	Fidelity Surety Boiler and Machinery Fire	1,315,724	-15.8%
11. 12.	Extended Coverage Inland Marine Homeowners		
14.	Commercial Multi-Peril Crop Hail Other Line of Insurance		
Doe	es filing only apply to certain territory (territories) or certain classes? If so, specify:	
Brie	ef description of filing. (If filing follows	rates of an advisory organization, specify or	ganization):
	ljusted to reflect all prior rate changes hange in Company's premium level w	hich will result from application of new rates	setts Bay Insurance Company
		r	Name of Company Holm - Pricing Consultant
			Official – Title

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SPRINGFIELD, ILLINOIS

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision eπective	January 1, 2009
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
 Automobile Physical Damage Private Passenger Commercial 		
Liability Other Than Auto		
I. Burglary and Theft		
5. Glass		
5. Fidelity		
7. Surety		
B. Boiler and Machinery	\$1,902,296	-27.7%
9. Fire 0. Extended Coverage	\$1, 3 02,2 3 0	-21.170
4 Internal Marrian		
12. Homeowners		
14. Crop Hail		
IE Othor		
Line of Insurance		
Ooes filing only apply to certain territory (ter		
Brief description of filing. (If filing follows rate Rate, rule and form filing for the company's	es of an advisory organization, specify of Vacant Buildings Program	ganization)
vate, rule and form ming for the company s	Vacarit Ballanings i Togram	
I. Significant base rate decreases up to -5	55.6% as shown in Exhibit 9.	
2. The minimum deductible for vacant resi	dential property is being increased from	\$100 to \$250.
Factors for deductible options above the	e minimum for residential and commercia	l risks are being filed.
 Private protection credits for residential premium credit. 	risks are being converted from a rate red	luction credit to a percent of
5. Statements have been added that the Is	SO Individual Risk Premium Modification	Plan applies to this program.
The Company will now provide Special associated with associated Special For	Form coverage if the risk meets certain r	equirements. Credits
7. Rating for Agreed Amount coverage is		
8. Rating for commercial property previous	sly not eligible for coverage is now being	introduced.
, rading for commercial property provide	., og.c.c .c. cc o. ago .c bog	

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.



United National Specialty Insurance Company
Name of Company

Peter Livaich - Senior Vice President

Official - Title

revised - previously eff 7/23/08

Serff# PERR- 125721463